

AMENDED IN ASSEMBLY APRIL 18, 2005
AMENDED IN ASSEMBLY MARCH 29, 2005
CALIFORNIA LEGISLATURE—2005–06 REGULAR SESSION

ASSEMBLY BILL

No. 813

Introduced by Assembly Member Baca

February 18, 2005

An act to ~~amend Section 2313 of, and to add Sections 2190.6 and 2249.5 to, the Business and Professions Code, and to add Section 138.7 to the Health and Safety Code, relating to health.~~

LEGISLATIVE COUNSEL'S DIGEST

AB 813, as amended, Baca. Women's heart health.

Existing law establishes the Office of Women's Health in the State Department of Health Services, and requires the office, in consultation with the interagency women's health task force established under existing law, to develop a coordinated state strategy for addressing the health-related needs of women. Existing law requires the department to place a priority on providing information to consumers, patients, and health care providers regarding women's gynecological cancers. Under existing law, this information may include, but is not limited to, educational and informational materials, and public service announcements and advertisements. Existing law provides that the department's duties in this regard are to be performed contingent upon the department receiving funds appropriated for this purpose.

This bill would give the department similar authority and would impose similar requirements regarding the provision of information regarding heart health risks for women.

~~Existing law, the Medical Practice Act, provides for the regulation of physicians and surgeons by the Medical Board of California. Under~~

~~that act, the board's Division of Licensing is required to adopt and administer standards for the continuing education of physicians and surgeons, and the board's Division of Medical Quality is required to take disciplinary action against those who are charged with committing unprofessional conduct and to report annually to the Legislature regarding those actions.~~

~~This bill would require the Division of Medical Quality to develop standards before June 1, 2007, to assure the competent review in cases concerning the treatment of female patients with heart disease, and to include in its annual report to the Legislature a description of actions relating to that practice. The bill would also require physicians and surgeons to complete a mandatory continuing education course in the subject of heart health risks for women by December 31, 2011, except that it would not apply to physicians practicing in pathology or radiology specialty areas. The bill would authorize the board to adopt regulations exempting physicians who do not engage in direct patient care, do not provide patient consultations or do not reside in California.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. *The Legislature finds and declares all of the*
- 2 *following:*
- 3 (i) *Heart disease is the number one killer of women, and*
- 4 *stroke is the number three killer of women.*
- 5 (ii) *Every year since 1984, cardiovascular disease has claimed*
- 6 *the lives of more women than men.*
- 7 (iii) *One in four women have some form of cardiovascular*
- 8 *disease, and one in three women will die from heart disease.*
- 9 (iv) *Cardiovascular disease claims more women's lives than*
- 10 *the next seven causes of death combined – about 500,000*
- 11 *women's lives a year – about one death every minute.*
- 12 (v) *Heart disease and stroke are striking women at a younger*
- 13 *age, and the risk increases in women after menopause.*
- 14 (vi) *Risk factors for heart disease include high blood pressure,*
- 15 *high cholesterol, diabetes, smoking, being overweight, being*
- 16 *physically inactive, age (especially after age 50), and having a*
- 17 *family history of early heart disease.*

1 (g) Only 13 percent of women report that heart disease and
2 stroke are their greatest health risk.

3 (h) The Legislature commends the existing educational efforts
4 of the State Department of Health Services and the American
5 Heart Association in educating the public on women's
6 cardiovascular disease, and encourages further outreach efforts.

7 ~~SECTION 1. Section 2190.6 is added to the Business and~~
8 ~~Professions Code, to read:~~

9 ~~2190.6. (a) All physicians and surgeons shall complete a~~
10 ~~mandatory continuing education course in the subject of heart~~
11 ~~health risks for women. For the purposes of this section, this~~
12 ~~course shall be a one-time requirement of 6 credit hours within~~
13 ~~the required minimum established by board regulation, to be~~
14 ~~completed by December 31, 2011. All physicians and surgeons~~
15 ~~licensed on and after January 1, 2006, shall complete this~~
16 ~~requirement within four years of their initial license or by their~~
17 ~~second renewal date, whichever occurs first. The board may~~
18 ~~verify completion of this requirement on the renewal application~~
19 ~~form.~~

20 ~~(b) By regulatory action, the board may exempt physicians and~~
21 ~~surgeons by practice status category from the requirement in~~
22 ~~subdivision (a) if the physician and surgeon does not engage in~~
23 ~~direct patient care, does not provide patient consultations, or does~~
24 ~~not reside in the State of California.~~

25 ~~(c) This section shall not apply to physicians and surgeons~~
26 ~~practicing in pathology or radiology specialty areas.~~

27 ~~SEC. 2. Section 2249.5 is added to the Business and~~
28 ~~Professions Code, to read:~~

29 ~~2249.5. The Division of Medical Quality shall develop~~
30 ~~standards before June 1, 2007, to assure the competent review in~~
31 ~~cases concerning the treatment of female patients with heart~~
32 ~~disease. The division may consult with entities such as the~~
33 ~~American Heart Association, and any other medical entity~~
34 ~~specializing in women's health issues to develop the standards,~~
35 ~~and shall employ, to the extent that they are applicable, current~~
36 ~~authoritative clinical practice guidelines.~~

37 ~~SEC. 3. Section 2313 of the Business and Professions Code is~~
38 ~~amended to read:~~

1 ~~2313. The Division of Medical Quality shall report annually~~
2 ~~to the Legislature, no later than October 1 of each year, the~~
3 ~~following information:~~

4 ~~(a) The total number of temporary restraining orders or interim~~
5 ~~suspension orders sought by the board or the division to enjoin~~
6 ~~licensees pursuant to Sections 125.7, 125.8 and 2311, the~~
7 ~~circumstances in each case that prompted the board or division to~~
8 ~~seek that injunctive relief, and whether a restraining order or~~
9 ~~interim suspension order was actually issued.~~

10 ~~(b) The total number and types of actions for unprofessional~~
11 ~~conduct taken by the board or a division against licensees, the~~
12 ~~number and types of actions taken against licensees for~~
13 ~~unprofessional conduct related to prescribing drugs, narcotics, or~~
14 ~~other controlled substances, including those related to the~~
15 ~~undertreatment or undermedication of pain.~~

16 ~~(c) Information relative to the performance of the division,~~
17 ~~including the following: number of consumer calls received;~~
18 ~~number of consumer calls or letters designated as~~
19 ~~discipline-related complaints; number of calls resulting in~~
20 ~~complaint forms being sent to complainants and number of forms~~
21 ~~returned; number of Section 805 reports by type; number of~~
22 ~~Section 801 and Section 803 reports; coroner reports received;~~
23 ~~number of convictions reported to the division; number of~~
24 ~~criminal filings reported to the division; number of complaints~~
25 ~~and referrals closed, referred out, or resolved without discipline,~~
26 ~~respectively, prior to accusation; number of accusations filed and~~
27 ~~final disposition of accusations through the division and court~~
28 ~~review, respectively; final physician discipline by category;~~
29 ~~number of citations issued with fines and without fines, and~~
30 ~~number of public reprimands issued; number of cases in process~~
31 ~~more than six months from receipt by the division of information~~
32 ~~concerning the relevant acts to the filing of an accusation;~~
33 ~~average and median time in processing complaints from original~~
34 ~~receipt of complaint by the division for all cases at each stage of~~
35 ~~discipline and court review, respectively; number of persons in~~
36 ~~diversion, and number successfully completing diversion~~
37 ~~programs and failing to do so, respectively; probation violation~~
38 ~~reports and probation revocation filings and dispositions; number~~
39 ~~of petitions for reinstatement and their dispositions; and~~

1 ~~caseloads of investigators for original cases and for probation~~
2 ~~cases, respectively.~~

3 ~~“Action,” for purposes of this section, includes proceedings~~
4 ~~brought by, or on behalf of, the division against licensees for~~
5 ~~unprofessional conduct which have not been finally adjudicated,~~
6 ~~as well as disciplinary actions taken against licensees.~~

7 ~~(d) The total number of reports received pursuant to Section~~
8 ~~805 by the type of peer review body reporting and, where~~
9 ~~applicable, the type of health care facility involved and the total~~
10 ~~number and type of administrative or disciplinary actions taken~~
11 ~~by the Medical Board of California with respect to the reports.~~

12 ~~(e) The number of malpractice settlements in excess of thirty~~
13 ~~thousand dollars (\$30,000) reported pursuant to Section 801.~~
14 ~~This information shall be grouped by specialty practice and shall~~
15 ~~include the total number of physicians and surgeons practicing in~~
16 ~~each specialty. For the purpose of this subdivision, “specialty”~~
17 ~~includes all specialties and subspecialties considered in~~
18 ~~determining the risk categories described in Section 803.1.~~

19 ~~(f) The total number and types of actions for unprofessional~~
20 ~~conduct taken by the board or a division against licensees, the~~
21 ~~number and types of actions taken against licensees for~~
22 ~~unprofessional conduct related to the failure to provide adequate~~
23 ~~information or treatment for heart disease in female patients.~~

24 ~~SEC. 4.~~

25 ~~SEC. 2.~~ Section 138.7 is added to the Health and Safety Code,
26 to read:

27 138.7. (a) The State Department of Health Services shall
28 place priority on providing information to consumers, patients,
29 and health care providers regarding women’s heart health risks,
30 including, signs and symptoms, risk factors, *the importance of*
31 *prevention*, ~~the benefits of~~ early detection through appropriate
32 diagnostic testing, and treatment options.

33 (b) The information may include, but is not limited to, the
34 following elements:

35 (1) Educational and informational materials in print, audio,
36 video, electronic, or other media.

37 (2) Public service announcements and advertisements.

38 (c) ~~(1)~~ The department may produce or contract with others to
39 develop the materials described in this section as the director
40 deems appropriate, or may survey available publications from the

1 American Heart Association and other appropriate resources, and
2 may collect and formulate a distribution plan and disseminate
3 these publications according to the plan. These materials may be
4 made available to the public free of charge and may include
5 distribution through the Medical Board of California, as well as
6 through other sources according to the distribution plan.

7 ~~(2) The department may require, as it deems appropriate,~~
8 ~~health care providers to make these materials available to~~
9 ~~patients.~~

10 (d) In exercising the powers under this section, the office shall
11 consult with appropriate health care professionals and providers,
12 consumers, and patients, or organizations representing them.

13 (e) The department may appoint a Women's Heart Disease
14 Information Advisory Council, which may include representation
15 from health care professionals and providers, consumers,
16 patients, *voluntary health organizations committed to the*
17 *research into and prevention of cardiovascular diseases*, and
18 other appropriate interests, *and shall include at least one*
19 *physician*. Members of the council shall receive no compensation
20 for their services, but shall be allowed their actual and necessary
21 expenses incurred in the performance of their duties.

22 (f) The department's duties pursuant to this section are
23 contingent upon the department receiving funds appropriated for
24 this purpose.

25 (g) The department may adopt any regulations necessary and
26 appropriate for the implementation of this section.